

STATE OF MAINE

DISTRICT COURT

Location \_\_\_\_\_

Docket No. \_\_\_\_\_

In re: \_\_\_\_\_

Minor

**PETITION FOR:** (Check one)

☐ **TERMINATION OF GUARDIANSHIP**

☐ **REMOVAL OF GUARDIAN**

☐ **RESIGNATION OF GUARDIAN**

18-A MRS §§ 1-310, 5-206-212

1. Petitioner Information:

Name: \_\_\_\_\_

Legal residence: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone: \_\_\_\_\_

2. Petitioner is:

a. ☐ A person interested in the welfare of the minor pursuant to 18-A M.R.S. § 5-212

because I am: \_\_\_\_\_

b. ☐ The minor.

3. Minor's Information:

Name: \_\_\_\_\_

Legal residence: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone: \_\_\_\_\_

4. Petitioner believes: (check where applicable)

☐ (a) The guardianship should be terminated for the following reason(s): \_\_\_\_\_

☐ (b) The guardian should be removed for the following reason(s): \_\_\_\_\_

☐ (c) The resignation of the guardian should be accepted for the following reason(s): \_\_\_\_\_

5. Is a new or continuing guardianship required? ☐ Yes ☐ No. If yes, explain what you are proposing and what steps you have taken to accomplish this. Please note that if a new or continuing guardianship is required, a new petition for the appointment of a guardian or successor guardian must accompany this petition. \_\_\_\_\_

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6. At the time of the guardian's appointment, was an attorney or a *guardian ad litem* appointed for the minor? ☐Yes ☐No If yes, identify the attorney or *guardian ad litem* below:

Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Telephone: \_\_\_\_\_

7. Will the minor attend the hearing? ☐Yes ☐No If no, state the reason why not:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Is an appointment of a guardian ad litem or attorney required? ☐ Yes ☐ No  
If no, state on what basis said appointment is believed unnecessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Does the minor reside in the county in which the initial appointment was made? ☐Yes ☐No  
If no, identify both the county of current residence and the county in which the appointment was made: \_\_\_\_\_

\_\_\_\_\_

10. Names and current addresses of all persons who must be notified, including the minor if applicable, and stating the relationship of each such person to the minor. (Indicate if waivers of notice have been or are to be filed.)

<u>NAME</u>	<u>ADDRESS</u>	<u>RELATIONSHIP</u>	<u>WAIVERS</u>
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

11. REQUEST FOR ORDER OR ORDERS:

☐ I request a judicial finding and order that this guardianship be terminated

- ☐ I request a judicial finding and order that the current guardian be removed.
- ☐ I request a judicial finding and order that the current guardian's resignation be accepted.

Under the penalty of perjury, I, the undersigned, state that all of the foregoing facts and statements are complete and accurate as far as I know or am informed.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of Petitioner or Attorney

Attorney for Petitioner(s), if any:

\_\_\_\_\_  
Name and Maine Bar Registration Number

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number

Attorney for Other Party, if any:

\_\_\_\_\_  
(Signature of Attorney and Maine Bar Registration Number)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number